PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2001												
		CLAIMS A	S FILED - (Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			52		, J. 1		R	ATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			52 minus 20=		* 32		×	\$ 9=		OR	X\$18=	574
INDEPENDENT CLAIMS			6 minus 3 =		* 3		×	42=		OR	X84=	25200
ML	LTIPLE DEPEN	IDENT CLAIM P	RESENT					40=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TC	TAL		OR	TOTAL	15080
CLAIMS AS AMENDED - PART II										-	OTHER	THAN
	20,000	(Column 1)	(Column 2)			(Column 3) SMALI			ENTITY	OR	SMALL	ENTITY
AMENDMENT A	Articles	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	§ 9=		OR	X\$18=	
	Independent	*	Minus	***	CL AIM	=	X	12=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+1	40=		OR	+280=	
								TOTAL		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								T. FEE			AUDII. PEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	HEST BER OUSLY	PRESENT EXTRA		ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	9=		OR	X\$18=	
	Independent	Independent * Minus FIRST PRESENTATION OF MULTIPLE		***	CLAIM	=	X42:			OR	X84=	
The state of the s							+1	40=		OR	+280≈	
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE	
	Sec. of the Control o	(Column 1)	##1	(Colur		(Column 3)	•					
AMENDMENT C	in second	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R/	ATE .	ADDI- TIONAL FEE	İ	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	XS	9≈		OR	X\$18=	
	Independent FIRST PRESE	ndependent		Γ CLAIM	<u> </u>	X	2=		OR	X84=		
<u> </u>								40≈		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT, FEE	
- Artei	If the "Highest Nu The "Highest Nun	mber Previously P nber Previously Pa	aid For" IN THI id For" (Total or	S SPACE Independ	is less tha ent) is the	in 3, enter "3." highest numbe			propriate box			